

Bay County 4-H Youth Programs
Request to Raise Funds/Accept Donations

This form must be completed, approved, signed by the 4-H Extension Educator, and on file at Bay County MSU Extension *two weeks prior* to any 4-H group conducting any fund raising activities or accepting donations.

4-H Group Name: _____ Person Making Request: _____

Address, City, Zip: _____ Date: _____

Phone: () _____ Email: _____

Treasurer's Name: _____

Describe the fundraising activity/donation (i.e. candy sale, car wash, dinner, etc.). Include company name if applicable, and where it will be conducted:

Beginning Date: _____ Ending Date: _____ Amount you hope to raise: _____

Describe the reason for the fundraising activity:

We, the members and volunteers of the _____ Bay County 4-H group, agree to raise funds in accordance with all guidelines as stated in the *Michigan 4-H Treasurer's Record Book (4H1203)* and with the United States Department of Agriculture regulations and agree to submit a *fundraiser report form* within 2 weeks of the completion of this fundraiser.

In addition, we agree to abide by the following stipulations:

- The group's annual Summary Financial Report must show all income and expenses associated with fundraising activity/donation and the documentation that the funds were used for and the purpose for which they were raised.
- Fundraising activities involving food must meet current Health Department regulations
- Fundraising activities should provide a tangible good or service for funds received.

Return to: Bay County MSU Extension Office
Attn: Fundraiser Coordinator
515 Center Avenue, Suite 301
Bay City, MI 48708

Phone: (989) 895-4026
Fax: (989) 895-4217

Signature of Person Making Request: _____ Date: _____

4-H Educator Signature: _____ Date: _____